FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mar 19 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # P9200000942 (2) TOM TYMA, INC. Mailing Address Principal Place of Business 792 DUCK KEY DR 792 DUCK KEY DR DUCK KEY FL 33050-3742 DUCK KEY FL 33050 3. Date Incorporated or Qualified 3a. Date of Last Report 10/26/1992 06/20/1996 4. FEI Number 2. Principal Place of Business Applied For 2a. Mailing Address 21 Not Applicable 84-0879918 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 25 29 30 Elorida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent B1 Name TYMA, TOM 792 DUCK KEY DR 82 Street Address (P.O. Box Number is Not Acceptable) DUCK KEY FL 33050 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Horida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. 13. DELETE Change TITLE 1111111 TYMA, TOM 1.2 NAM NAME 792 DUCK KEY DR STREET ADDRESS 1,3 STREET ADDRESS DUCK KEY FL 33050 CITY-ST-ZIF 1.4 CDY-SI-ZIP Change DELETE Addition TITLE 2.1 1018 NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - 7/11 DELETE Change Addition TITLE 3.1.1IILE NAME 3.2 NAMI STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4, CHY-ST-7IP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CHY - S1 - 7IP DELETE Change Addition TITLE 51][[[] NAME 5.2 NAM STREET ADDRESS 5.3 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 60. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address.

5.4 CITY - 51 - ZIP

6.3 STREET ADDRESS

6.4 CHY-\$1-7IP

6.1101.0

6.2 NAME

🔲 DELETE

CONSTUDE THE CASEMA

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

3/14/97

Addition

Change

FILED